

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Gordon Ackley For Congress

ADDRESS (number and street)

24-E Honduras



Check if different than previously reported. (ACC)

St. Thomas

VI

00802

2. FEC IDENTIFICATION NUMBER ▼

C

C00620070

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

VI

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y

04

D D / Y Y Y Y

01

Y Y Y Y

2016

through

M M / D D / Y Y Y Y

06

D D / Y Y Y Y

30

Y Y Y Y

2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Jennifer Ackley

Signature of Treasurer Jennifer Ackley

[Electronically Filed]

Date

M M / D D / Y Y Y Y

07

D D / Y Y Y Y

15

Y Y Y Y

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Gordon Ackley For Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	6

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	0.00	0.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	0.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	0.00	0.00
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	0.00	0.00
8. Cash on Hand at Close of Reporting Period (from Line 27).....	0.00	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	3857.99	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

PAGE 3 / 14

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Gordon Ackley For Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	6

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

(ii) Unitemized.....

(iii) TOTAL of contributions from individuals ▶

(b) Political Party Committees.....

(c) Other Political Committees (such as PACs).....

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES**13. LOANS:**

(a) Made or Guaranteed by the Candidate.....

(b) All Other Loans.....

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)**15. OTHER RECEIPTS (Dividends, Interest, etc.)****16. TOTAL RECEIPTS** (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 14

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	0.00	0.00
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	0.00	0.00

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	0.00
25. SUBTOTAL (add Line 23 and Line 24).....	0.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	0.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	0.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 5 OF 14

☐ 11a ☐ 11b ☐ 11c ☒ 11d
12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Gordon Ackley For Congress

Full Name (Last, First, Middle Initial)

Gordon P. Ackley

Mailing Address PO Box 302179

City

St. Thomas

State

VI

Zip Code

00803

FEC ID number of contributing
federal political committee.

C H6VI01024

Name of Employer

Ackley Caribbean Enterprises

Occupation

Entrepreneur

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1059.10

Date of Receipt

06 / **07** / **2016**

Transaction ID : A-21

Amount of Each Receipt this Period

1038.76

☒ Memo Item

In-Kind Travel expense to be reimbursed

Full Name (Last, First, Middle Initial)

Gordon P. Ackley

Mailing Address PO Box 302179

City

St. Thomas

State

VI

Zip Code

00803

FEC ID number of contributing
federal political committee.

C H6VI01024

Name of Employer

Ackley Caribbean Enterprises

Occupation

Entrepreneur

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1408.10

Date of Receipt

06 / **13** / **2016**

Transaction ID : A-22

Amount of Each Receipt this Period

349.00

☒ Memo Item

In-Kind Website expense to be reimbursed

Full Name (Last, First, Middle Initial)

Gordon P. Ackley

Mailing Address PO Box 302179

City

St. Thomas

State

VI

Zip Code

00803

FEC ID number of contributing
federal political committee.

C H6VI01024

Name of Employer

Ackley Caribbean Enterprises

Occupation

Entrepreneur

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1708.10

Date of Receipt

06 / **17** / **2016**

Transaction ID : A-23

Amount of Each Receipt this Period

300.00

☒ Memo Item

In-Kind Website expense to be reimbursed

SUBTOTAL of Receipts This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 14

☐ 11a ☐ 11b ☐ 11c ☒ 11d ☐ 15
12 13a 13b 14

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NAME OF COMMITTEE (In Full)

Gordon Ackley For Congress

Full Name (Last, First, Middle Initial)

Gordon P. Ackley

Mailing Address PO Box 302179

City

St. Thomas

State

VI

Zip Code

00803

FEC ID number of contributing
federal political committee.

C H6VI01024

Name of Employer

Ackley Caribbean Enterprises

Occupation

Entrepreneur

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1758.10

Date of Receipt

M M / D D / Y Y Y Y
06 / 20 / 2016

Transaction ID : A-24

Amount of Each Receipt this Period

25.00

☒ Memo Item

In-Kind Administrative expense to be reimbursed

Full Name (Last, First, Middle Initial)

Gordon P. Ackley

Mailing Address PO Box 302179

City

St. Thomas

State

VI

Zip Code

00803

FEC ID number of contributing
federal political committee.

C H6VI01024

Name of Employer

Ackley Caribbean Enterprises

Occupation

Entrepreneur

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1758.10

Date of Receipt

M M / D D / Y Y Y Y
06 / 20 / 2016

Transaction ID : A-25

Amount of Each Receipt this Period

25.00

☒ Memo Item

In-Kind Administrative expense to be reimbursed

Full Name (Last, First, Middle Initial)

Gordon P. Ackley

Mailing Address PO Box 302179

City

St. Thomas

State

VI

Zip Code

00803

FEC ID number of contributing
federal political committee.

C H6VI01024

Name of Employer

Ackley Caribbean Enterprises

Occupation

Entrepreneur

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1782.44

Date of Receipt

M M / D D / Y Y Y Y
06 / 21 / 2016

Transaction ID : A-26

Amount of Each Receipt this Period

24.34

☒ Memo Item

In-Kind Website expense to be reimbursed

SUBTOTAL of Receipts This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 14

☐ 11a ☐ 11b ☐ 11c ☒ 11d ☐ 15
12 13a 13b 14

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NAME OF COMMITTEE (In Full)

Gordon Ackley For Congress

Full Name (Last, First, Middle Initial)

Gordon P. Ackley

Mailing Address PO Box 302179

City

St. Thomas

State

VI

Zip Code

00803

FEC ID number of contributing
federal political committee.

C H6VI01024

Name of Employer

Ackley Caribbean Enterprises

Occupation

Entrepreneur

Receipt For: 2016

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

2583.63

Date of Receipt

M M / D D / Y Y Y Y
06 / 22 / 2016

Transaction ID : A-27

Amount of Each Receipt this Period

19.99

☒ Memo Item

In-Kind Website expense to be reimbursed

Full Name (Last, First, Middle Initial)

Gordon P. Ackley

Mailing Address PO Box 302179

City

St. Thomas

State

VI

Zip Code

00803

FEC ID number of contributing
federal political committee.

C H6VI01024

Name of Employer

Ackley Caribbean Enterprises

Occupation

Entrepreneur

Receipt For: 2016

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

2583.63

Date of Receipt

M M / D D / Y Y Y Y
06 / 22 / 2016

Transaction ID : A-28

Amount of Each Receipt this Period

200.00

☒ Memo Item

In-Kind Membership Dues to be reimbursed

Full Name (Last, First, Middle Initial)

Gordon P. Ackley

Mailing Address PO Box 302179

City

St. Thomas

State

VI

Zip Code

00803

FEC ID number of contributing
federal political committee.

C H6VI01024

Name of Employer

Ackley Caribbean Enterprises

Occupation

Entrepreneur

Receipt For: 2016

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

2583.63

Date of Receipt

M M / D D / Y Y Y Y
06 / 22 / 2016

Transaction ID : A-29

Amount of Each Receipt this Period

581.20

☒ Memo Item

In-Kind Travel expense to be reimbursed

SUBTOTAL of Receipts This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 14

☐ 11a ☐ 11b ☐ 11c ☒ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Gordon Ackley For Congress

Full Name (Last, First, Middle Initial)

Gordon P. Ackley

Mailing Address PO Box 302179

City

St. Thomas

State

VI

Zip Code

00803

FEC ID number of contributing
federal political committee.

C H6VI01024

Name of Employer

Ackley Caribbean Enterprises

Occupation

Entrepreneur

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

3449.63

Date of Receipt

06 / **28** / **2016**

Transaction ID : A-30

Amount of Each Receipt this Period

570.00

☒ Memo Item

In-Kind Website expense to be reimbursed

Full Name (Last, First, Middle Initial)

Gordon P. Ackley

Mailing Address PO Box 302179

City

St. Thomas

State

VI

Zip Code

00803

FEC ID number of contributing
federal political committee.

C H6VI01024

Name of Employer

Ackley Caribbean Enterprises

Occupation

Entrepreneur

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

3449.63

Date of Receipt

06 / **28** / **2016**

Transaction ID : A-31

Amount of Each Receipt this Period

296.00

☒ Memo Item

In-Kind Travel expense to be reimbursed

Full Name (Last, First, Middle Initial)

Gordon P. Ackley

Mailing Address PO Box 302179

City

St. Thomas

State

VI

Zip Code

00803

FEC ID number of contributing
federal political committee.

C H6VI01024

Name of Employer

Ackley Caribbean Enterprises

Occupation

Entrepreneur

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

3780.31

Date of Receipt

06 / **29** / **2016**

Transaction ID : A-32

Amount of Each Receipt this Period

330.68

☒ Memo Item

In-Kind Travel expense to be reimbursed

SUBTOTAL of Receipts This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 14

☐ 11a ☐ 11b ☐ 11c ☒ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Gordon Ackley For Congress

Full Name (Last, First, Middle Initial)

Gordon P. Ackley

Mailing Address PO Box 302179

City

St. Thomas

State

VI

Zip Code

00803

FEC ID number of contributing
federal political committee.

C H6VI01024

Name of Employer

Ackley Caribbean Enterprises

Occupation

Entrepreneur

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

3857.99

Date of Receipt

M M / D D / Y Y Y Y
06 30 2016

Transaction ID : A-33

Amount of Each Receipt this Period

77.68

☒ Memo Item

In-Kind Travel expense to be reimbursed

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

0.00

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 10 OF 14

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Gordon Ackley For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Gordon P. Ackley

Nature of Debt (Purpose):

Website expense to be reimbursed

Mailing Address PO Box 302179

City State

Zip Code

St. Thomas

VI

00803

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-2

Amount Incurred This Period

20.34

Payment This Period

0.00

Outstanding Balance at Close of This Period

20.34

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Gordon P. Ackley

Nature of Debt (Purpose):

Travel expense to be reimbursed

Mailing Address PO Box 302179

City State

Zip Code

St. Thomas

VI

00803

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-16

Amount Incurred This Period

1038.76

Payment This Period

0.00

Outstanding Balance at Close of This Period

1038.76

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Gordon P. Ackley

Nature of Debt (Purpose):

Website expense to be reimbursed

Mailing Address PO Box 302179

City

State

Zip Code

St. Thomas

VI

00803

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-3

Amount Incurred This Period

349.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

349.00

1) **SUBTOTALS** This Period This Page (optional) ▶

1408.10

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 11 OF 14

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Gordon Ackley For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Gordon P. Ackley

Nature of Debt (Purpose):

Website expense to be reimbursed

Mailing Address PO Box 302179

City State

Zip Code

St. Thomas

VI

00803

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-9

Amount Incurred This Period

300.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

300.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Gordon P. Ackley

Nature of Debt (Purpose):

Administrative expense to be reimbursed

Mailing Address PO Box 302179

City State

Zip Code

St. Thomas

VI

00803

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-4

Amount Incurred This Period

25.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

25.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Gordon P. Ackley

Nature of Debt (Purpose):

Administrative expense to be reimbursed

Mailing Address PO Box 302179

City

State

Zip Code

St. Thomas

VI

00803

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-5

Amount Incurred This Period

25.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

25.00

1) **SUBTOTALS** This Period This Page (optional) ▶

350.00

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 12 OF 14

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Gordon Ackley For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Gordon P. Ackley

Nature of Debt (Purpose):

Website expense to be reimbursed

Mailing Address PO Box 302179

City State

Zip Code

St. Thomas

VI

00803

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-6

Amount Incurred This Period

24.34

Payment This Period

0.00

Outstanding Balance at Close of This Period

24.34

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Gordon P. Ackley

Nature of Debt (Purpose):

Travel expense to be reimbursed

Mailing Address PO Box 302179

City State

Zip Code

St. Thomas

VI

00803

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-11

Amount Incurred This Period

581.20

Payment This Period

0.00

Outstanding Balance at Close of This Period

581.20

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Gordon P. Ackley

Nature of Debt (Purpose):

Website expense to be reimbursed

Mailing Address PO Box 302179

City

State

Zip Code

St. Thomas

VI

00803

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-7

Amount Incurred This Period

19.99

Payment This Period

0.00

Outstanding Balance at Close of This Period

19.99

1) **SUBTOTALS** This Period This Page (optional) ▶

625.53

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 13 OF 14

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Gordon Ackley For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Gordon P. Ackley

Nature of Debt (Purpose):

Membership Dues to be reimbursed

Mailing Address PO Box 302179

City State

Zip Code

St. Thomas

VI

00803

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-8

Amount Incurred This Period

200.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

200.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Gordon P. Ackley

Nature of Debt (Purpose):

Website expense to be reimbursed

Mailing Address PO Box 302179

City State

Zip Code

St. Thomas

VI

00803

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-10

Amount Incurred This Period

570.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

570.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Gordon P. Ackley

Nature of Debt (Purpose):

Travel expense to be reimbursed

Mailing Address PO Box 302179

City

State

Zip Code

St. Thomas

VI

00803

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-12

Amount Incurred This Period

296.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

296.00

1) **SUBTOTALS** This Period This Page (optional) ▶

1066.00

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 14 OF 14

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Gordon Ackley For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Gordon P. Ackley

Nature of Debt (Purpose):

Travel expense to be reimbursed

Mailing Address PO Box 302179

City State

Zip Code

St. Thomas

VI

00803

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-13

Amount Incurred This Period

330.68

Payment This Period

0.00

Outstanding Balance at Close of This Period

330.68

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Gordon P. Ackley

Nature of Debt (Purpose):

Travel expense to be reimbursed

Mailing Address PO Box 302179

City State

Zip Code

St. Thomas

VI

00803

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-14

Amount Incurred This Period

77.68

Payment This Period

0.00

Outstanding Balance at Close of This Period

77.68

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ▶

408.36

2) **TOTALS** This Period (last page this line number only) ▶

3857.99

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

3857.99